Approuse through 10/31/2002. OMB 0651-0032

May 2, 2001

Date

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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. SAIC0043

First Inventor Thomas LASH

SYSTEM AND METHOD FOR PATCH ENABLED DATA

-		~ L	Title	TRANSMISSIONS	\$	≛ ص ≛				
ຕຸ້ ທີ່ (Onlv for n	ew nonprovisional applications un	der 37 C.F.R. 1.53(b))	Expres	s Mail Label No.		S. S. F.				
שׁ שׁ	APPLICATION E	LEMENTS	A	DDRESS TO): Box Paten	Commissioner for Patents 2006 Application n, DC 20231				
1.	ee Transmittal Form (e.g., P Submit an original and a duplicate for fe Applicant claims small entity s See 37 CFR 1.27.	TO/SB/17) e processing) tatus. [Total Pages 34] low) lications red R & D able, endix	9 10	Computer F. Nucleotide and/o (if applicable, all a.	r CD-R in duplic Program (Appeor or Amino Acid Inecessary) Readable Forn Sequence Listin I or CD-R (2 co s verifying iden PANYING APP ent Papers (cov §3.73(b) Statelere is an assign	cate, large table or indix) Sequence Submission In (CRF) Ing on: Ing ing ing indix indix indix Ing indix I				
4. D D 5. Oath or I a. D b. D	rawing(s) (35 <i>U.S.C.113</i>)	[Total Pages 2 copy) 1 (37 CFR 1.63 (d)) 2 with Box 18 completed DR(S) 1 (s) (s) (s) (e) (s) (e) (s) (e) (s) (e) (s) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f] 12] 13 14 d) 15	 11. ☐ English Translation Document (if applicable) 12. ☐ Information Disclosure ☐ Copies of IDS Statement (IDS)/PTO-1449 Citations 13. ☐ Preliminary Amendment 14. ☐ Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. ☐ Other: 						
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) Of prior application No: Prior application information: Examiner For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.										
				ICE ADDRESS						
Customer Number or Bar Code Label (Insert Customer No. o.				or Correspondence address below attach bar code label here)						
Name	George T. Marcou									
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Country	USA	Telephone	202	2/508-5800	Fax	202/508-5858				
Name (Pr	int/Type) George T.	la eou	Regi	stration No. (Attor	mey/Agent)	33,014				

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FEE	TR	AN	SMI	T	TAL
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Patent fees are subject to annual revision.

Complete if Known							
Application Number	To be assigned						
Filing Date	Herewith						
First Named Inventor	Tom LASH						
Examiner Name	To be assigned						
Group / Art Unit	To be assigned						
Attorney Docket No.	SAIC0043						

TOTA	L AMO	UNT C	F PAYN	IENT (\$)	1224		Attorne	ey Docke	t No.	SAIC	0043	/
		MET	HOD OF P	AYMENT (check	one)					FEE C	ALCULATION (continued)	
1. Depo	osit	indi	cated fees	ioner is hereby at and credit any ov			3. ADD	ITIONAL Large Entity Fee (\$)	Fee Code	Small Entity Fee (\$)	Fee Description	Fee Pald
Acco Num		501	458				105	130	205	65	Surcharge - late filing fee or oath	T ald
Depo							127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
Acco		KIL	PATRICK	STOCKTON LLP			139	130	139	130	Non-English specification	
Nam							147	2,520	147	2,520	For filing a request for reexamination	
	Under 37	ČFR 1.	ional Fee I	7			112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
	See 37 C	FR 1.2		y status.			113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
2. 🛛	Payme	nt Enci	osea:				115	110	215	55	Extension for reply within first month	
⊠	Check		Credit card	☐ Money Order	☐ Other		116	390	216	195	Extension for reply within second month	
			FFF C	ALCULATION	-		117	890	217	445	Extension for reply within third month	
1. E	BASIC FI	LING F					118	1,390	218	695	Extension for reply within fourth month	
Large	•	Small	Entity				128	1,890	228	945	Extension for reply within fifth month	
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description		Paid	119	310	219	155	Notice of Appeal	
101	710	201	(\$) 355	Utility filing fee	710		120	310	220	155	Filing a brief in support of an appeal	
106	320	206	160	Design filing fee	1710		121	270	221	135	Request for oral hearing	
107	490	207	245	Plant filing fee			138	1,510	138	1,510	Petition to institute a public use proceeding	
108	710	208	355	Reissue filing fee			140	110	240	55	Petition to revive – unavoidable	
114	150	214	75	Provisional filling	fee		141	1,240	241	620	Petition to revive – unintentional	
			SUBTOTA	(4)	(\$)	710	142	1,240	242	620	Utility issue fee (or reissue)	
			3001012	- (1)	(47.		143	440	243	220	Design issue fee	
2. EXTF	RA CLAI	M FEE:	S		_		144	600	244	300	Plant issue fee	
					ee from	Fee	122	130	122	130	Petitions to the Commissioner	
Total Clair		<u> </u>	20** =		elow 18 = [Paid 234	123	130	123	130	Petitions related to provisional applications	
Independer Claims	nt 6		-3** =	3 X	80 =	240	126	180	126	180	Submission of Information Disclosure Stmt	
Multiple Dependent				×	= [0	581	40	581	40	Recording each patent assignment per property (times number of properties)	40
Large Fee	Entity Fee	Fee	Fee	y Fee Descriptl	lon		146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
Code	(\$)	Code	,	•			149	710	249	355	For each additional invention to be	
103 102	18 80	203 202	9 40		Claims in excess of 20 ndependent claims in excess of 3						examined (37 CFR § 1.129(b))	
102	270	202	135		ndent claim, if n		179	710	279	355	Request for Continued Examination (RCE)	
109	80	209	- 40		lependent claim		169	900	169	900	Request for expedited examination of a design application	
onginal patent 110 18 210 9 ** Reissue claims in excess of 20 and over original patent												
SUBTOTAL (2) (\$) 474						Other fee (specify)						
**or num	ber previo	ously pai	d, if greate	; For Reissues, se	e above		*Reduc	ed by Ba	sic Filin	g Fee Pa	aid SUBTOTAL (3) (\$) 40	

SUBMITTED BY				Cor	nplete (if applicable)	
Name (Print/Type)	Good T. M.	Registration No. Attomes/Agent)	33,014	Telephone	202.508.5800	
Signature				Date	May 2, 2001	

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